

San Francisco, California — 2004 (N=300)

Figure A. Age of GISP participants, in years, 2004

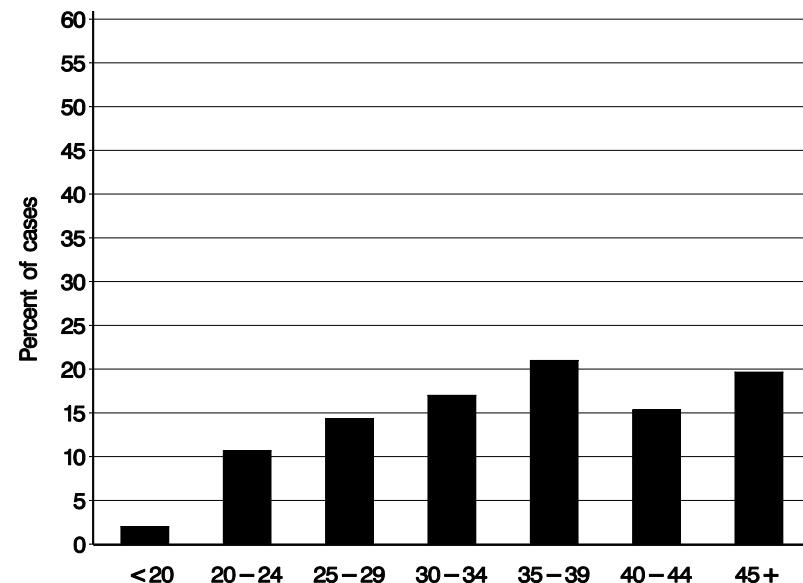


Figure B. Race/ethnicity of GISP participants, 2004

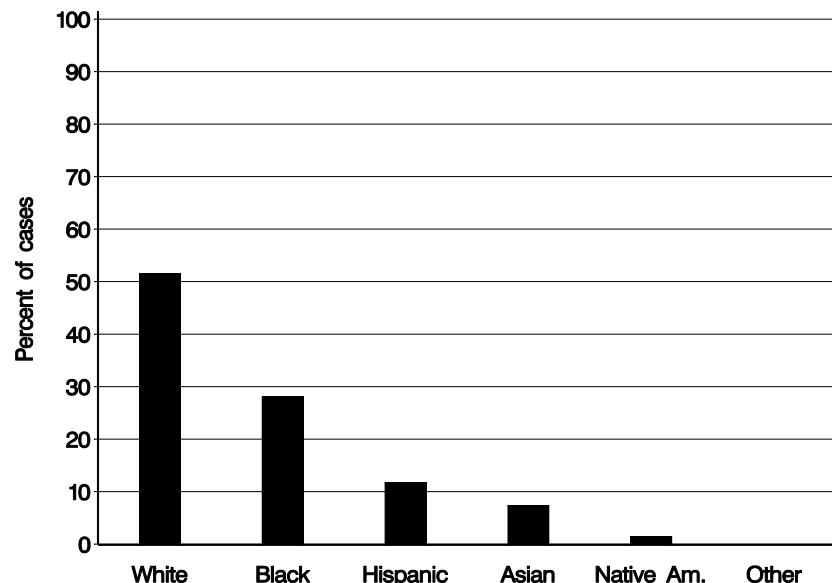


Figure C. Percentage of GISP participants identifying as men who have sex with men, 1988–2004

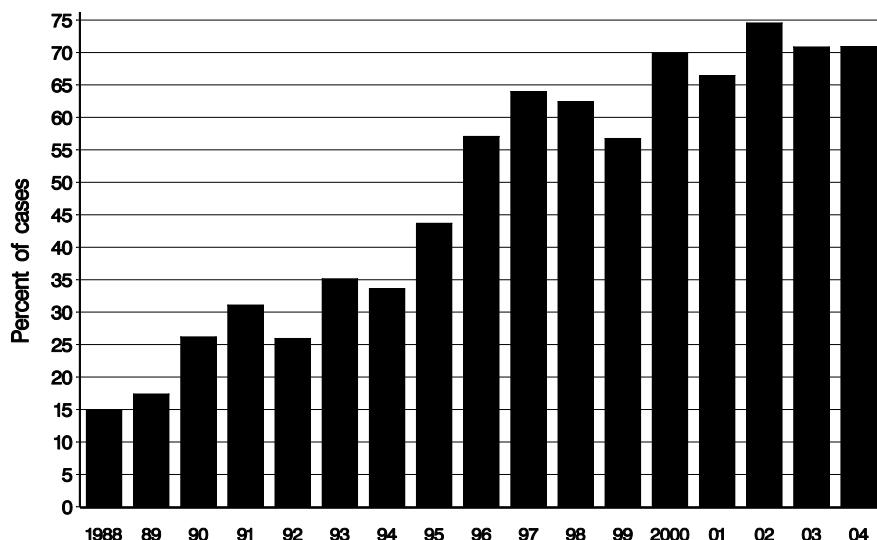
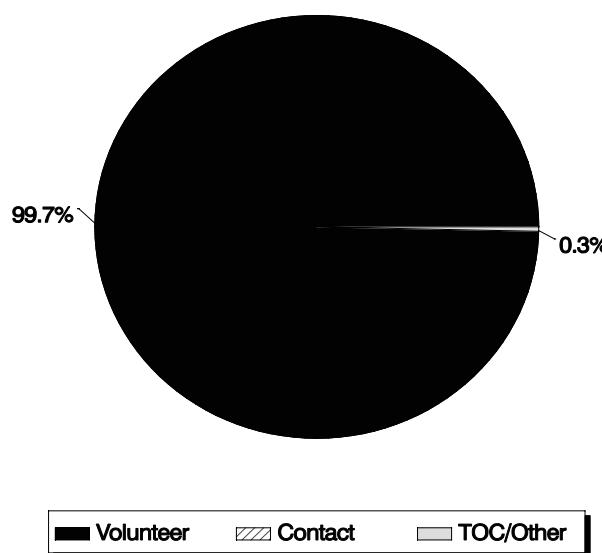
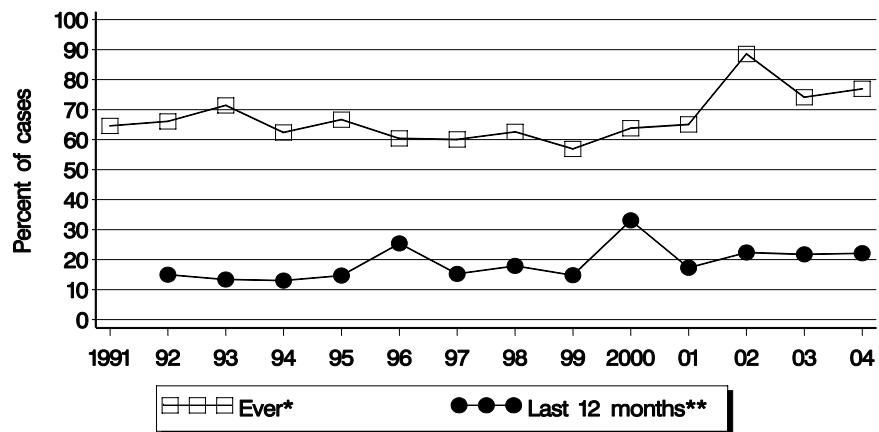


Figure D. Reason for visit among GISP participants, 2004



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Figure E. Previous episode of gonorrhea among GISP participants, 1991–2004

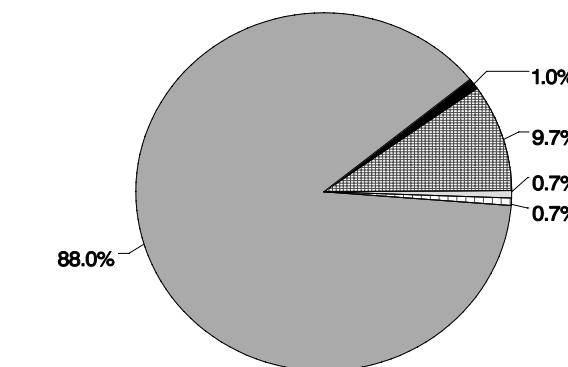


*Data first collected in 1991.

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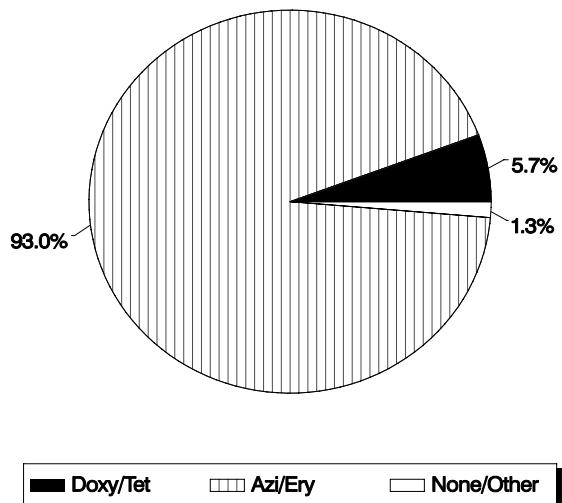
Note: Data points not shown when >30% data missing.

Figure F. Drugs used to treat gonorrhea among GISP participants, 2004



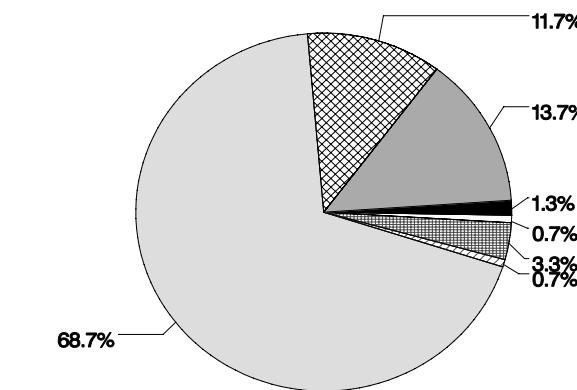
Drug	Percentage
Ceftriaxone 125 mg	88.0%
Cefixime	9.7%
Other Cephalo.	0.7%
Other	0.7%
Ceftriaxone 250 mg	1.0%

Figure G. Drugs used to treat *Chlamydia trachomatis* infection among GISP participants, 2004



Drug	Percentage
Azi/Ery	93.0%
Doxy/Tet	5.7%
None/Other	1.3%

Figure H. Resistance to penicillin and tetracycline among GISP isolates, 2004



Resistance Category	Percentage
Susceptible	68.7%
PPNG/TRNG	13.7%
TRNG	11.7%
PenR	1.3%
CMRNG	0.7%
TetR	0.7%
PPNG	0.7%

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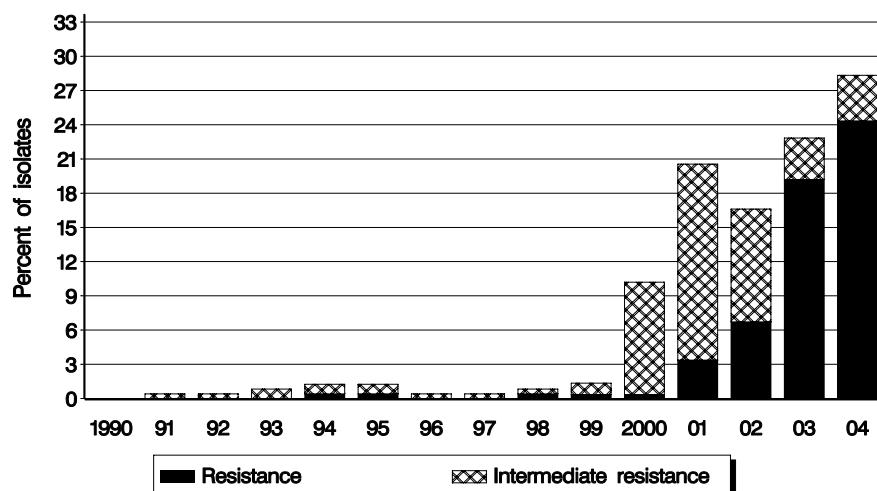
Figure I. Decreased susceptibility to ceftriaxone among GISP isolates, 1988–2004

No isolates with decreased susceptibility to ceftriaxone have been identified at this clinic.

Figure J. Decreased susceptibility to cefixime among GISP isolates, 1992–2004

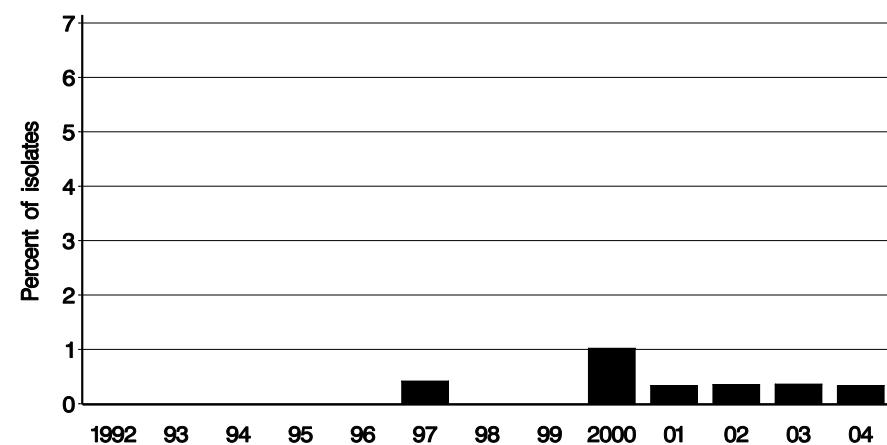
No isolates with decreased susceptibility to cefixime have been identified at this clinic.

Figure K. Intermediate resistance and resistance to ciprofloxacin among GISP isolates, 1990–2004



Note: Susceptibility to ciprofloxacin first measured in 1990.

Figure L. Decreased susceptibility to azithromycin among GISP isolates, 1992–2004



Note: Susceptibility to azithromycin first measured in 1992.

Note: Decreased susceptibility to azithromycin is defined here as $\geq 1.0 \mu\text{g}/\text{ml}$.
No NCCLS criteria currently exist.